VIRGINIA POLLUTION ABATEMENT PERMIT APPLICATION FORM A ALL APPLICANTS

1. FACILITY OR APPLICANT INFORMATION

Mailing Address:	same
Physical Location/ Address:	97 Railside Drive, Weyers Cave, VA 24486
County/City:	Augusta
Facility Name or Applicant Name:	Houff Corporation

2. OWNER INFORMATION

Owner Legal Name:	Houff Corporation
Mailing Address:	97 Railside Drive, Weyers Cave, VA 24486
Telephone Number:	540-234-9246
Email address:	tim.grove@houffcorp.com

3. OWNER CONTACT INFORMATION

Owner Contact Name:	Tim Grove
Title:	Biosolids Manager
Mailing Address:	same
Telephone Number:	540-234-9246
Email address:	tim.grove@houffcorp.com

4. EXISTING PERMITS: (e.g., VPA, VPDES; VWP, RCRA; UIC; other)

Agency	Permit Type	Permit Number	
VA DEQ	VPA land application	VPA01566, VPA01580, VPA01581	
VA DEQ	Air permit	81666	

5. NATURE OF BUSINESS: land application of biosolids and industrial residuals

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SIC Code(s):	562119	
Cic Code(o).	002110	

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6.	TYPE OF POLLUTAN	MANAGEMENT ACTIVITY: check	the appropriate box(es) Proposed	Existing			
	Animal Feeding Operat (complete Form B)	<u>ions</u>					
	Industrial Waste (complete Form C	& Form D: Parts D-V & D-VI)		Х			
	Land Application of Mu (complete Form D:						
		Parts D-II, D-IV, D-V & D-VI; and nts for Transport, Storage and Land		X			
	Reclamation and/or Dis (Application Adden	stribution of Reclaimed Wastewater dum)					
7.	GENERAL LOCATION MAP:						
	Provide a general location map which clearly identifies the location of the facility.						
8.	CONSENT TO RECEIVE AND CERTIFY RECEIPT OF ELECTRONIC MAIL:						
	The Department of Environmental Quality (DEQ) may deliver permits, certifications and plan approvals to recipients, including applicants or permittees, by electronically certified mail where the recipients notify DEQ of their consent to receive mail electronically (§ 10.1-1183). Check only one of the following to consent to or decline receipt of electronic mail from DEQ as follows:						
	X Applicant or permittee agrees to receive by electronic mail the permit and any plan approval associated with the permit that may be issued for the proposed pollutant management activity, and t certify receipt of such electronic mail when requested by the DEQ.						
		ant or permittee declines to receive by electronic mail the permit and any plan approvals ated with the permit that may be issued for the proposed pollutant management activity.					
9.	SIGNATURE AND CERTIFICATION STATEMENT:						
	I certify under penalty of law that this document and all attachments were prepared under my direction of supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering information, the information submitted is to the best of my knowledge and belief true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment for knowing violations. I further certify that I am an authorized signatory as specified in the VPA Permit Regulation (9VAC25-32).						
Sig	nature:	find for		Date: 1/17/19			
Printed Name:		Timothy J. Grove					
Title:		Biosolids Manager					

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Facility Location Map



